CC3/AIG21006987/Avc

HEr:

ASS	IGNMENT
From: Date:	Veh No: SLV4898S. Yr Regn: 2021, March
11011	Type: M.Ca) / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
Estimated Cost:	Truck / Trailer or
OD / TP / WS / TP RES / OD RES / EVA / INV / MV	Make: Andi A4 c.c 1984
To Inspect Vehicle No:	Colour Black A/G: Insured / Std / NI / NA
at Workshop m/s	Sp.Reading 7096. T/Radio: Insured / Std / NI / NA
of	
Insured:	Eng/No: WAUZZZF4SMX000903
Policy No. 7210027627	Gen. Cond: Good / Fair / Poor / Burnt
Claims No. 4022088803SG	
Sum Insured: Excess: 1100	Steering: Inorder / Jammed / Leaked / Burnt or
(Client's Record)	Brake: Inorder / Jammed / Leaked / Burnt or
Make of Veh:	Modi: Nil / S(Rip) / STD A/Rim or
	Tyre Size: F: 275/50R17-
(Policy Condition)	R: 225/50R17.
Remark: The veh had commenced its N/S O/S	BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
repair at the time of inspection.	TOYO/YOKO or Henkook.
Bal. or Market Value:	<u>Front</u> <u>Rear</u>
IDAC Accident Rport: Consistent? : Yes or No	R/Bal. 06 mm R/Bal. 06 mm
GIA / PR Seen: Consistent? : Yes or No	L/Bal. L/Bal. mm
Est. Repairs: days Res.: Yes or No	D.O.A. D.O.I. 23/06/21
Lum Sum: % 3 Val.: Yes or No	'Survey held at
	Des. of Damages Fro / Rear / O/S / N/S / U/C / Rooftop or
CA / REV / REP. / 24 HRS Vehicle: IN / OUT	at a rontal rate \$96.3 per day (inclusive of 6.91).
Date: Person Contacted:	The U/C / Chassis frame / Body Structure affected due to collision.
Date / Time Action / Instruction	
OD A16.	- VAN ENHANCE CIVE
24/06/21@3.35pm revert to AIG via Merimen.	BD X STREEGER GEBT
24/06/21@5.17pm Kok Chong informed C/A v	la Merimen.
mv: 180K PV: 73.7K.	
Nett:	
25/06/21@9.55am Informed Tony C/A & ex:\$^	1100 by email.
	David Of Panalin
Date/Time, File Pass to? : Preli. Report	Days Of Repair:
i) : Final Report	Resurvey No. of Trip: Survey Fee:
Date/Time, File Return to?	Transportation: Site Insp. (\$) _ 3+RSSI
2) Add Fo	
	: Interview (\$) Photos
Report Formet:	: Tech. Inve (\$) Others
Lump Sum / LBJ: (\$:Weellend (\$

SA01216L0005 / AIG Asia Pacific Insurance Pte. Ltd. ENTRY DATE & TIME: 21/06/2021 12:28 (SGT) SUBMITTED BY: Grace Tan VERSION: 1 (21/06/2021 12:28 (SGT))



SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Please report <u>correctly</u> the details of the accident to speed up the claims process.

2. This Form must be <u>completed by the Policyholder and/or the Authorised Driver</u>
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or witholding of material facts may allow insurance companies to repudiate policy liability.

4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.

5. Any false reporting may be referred to the Police for investigation. 6. This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.

7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

ACCIDENT STATEMENT

21/06/2021 12:28 (SGT) Date of Submission 19/06/2021 13:20 (SGT) Date of Accident 61 Irrawaddy Rd, Singapore 329557 **Exact Location of Accident** Additional Location Information Singapore Country/State of Loss

DETAILS OF OWN VEHICLE

1984

SLV4898S Vehicle Registration Number

INSURED/POLICYHOLDER

No Is company? LIM KAR HENG DENNIS Name Of Registered Owner S1527083G NRIC No NOEMAIL@AIG.COM **Email Address** (Phone) +65-96254063 Mobile Phone No +65-96254063 Alternative Phone No

VEHICLE PARTICULARS

Audi Manufacturer A4 Model Variant Exact purpose for which vehicle was being used at time of accident Are you claiming under your own insurance policy for repair to No - Reporting only your vehicle? Private car Vehicle Category Auto Transmission

INSURANCE COMPANY

AIG Asia Pacific Insurance Pte. Ltd. Name of Insurance Company Comprehensive Type of Coverage No Fleet Policy 7210027627 Policy Number Cover Note Number

DRIVER

CC

Della Lim Zi Mei Name of Driver S9506775A NRIC No

Date Of Birth Occupation Date Of Driving Pass Driving experience Gender Mobile Number Alt. Phone Number **Email Address**

Address Address complement Postcode

Is the driver the policyholder?

If No, Relationship of the Driver with the Insured

Does Driver Own Other Vehicles?

Vehicle Registration Number of Other Vehicle Owned by Driver

Insurance Company of Other Vehicle Owned by Driver

25/02/1995

Indoor

06/11/2013

7 YEARS AND 7 MONTHS

Female

(Phone) +65-96254063

NOEMAIL@AIG.COM

50 CHOA CHU KANG NORTH 7

REGENT GROVE 06-09 SINGAPORE

689527

No

Child

No

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident Collided into Pedestrian Weather Conditions Clear Road Surface Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident? No Number of vehicles involved in the accident 1 Was anybody injured in the Accident? Yes Was any injured conveyed to hospital by ambulance? No Was any other material or property damaged? No Number of Passengers (Including Driver) 2 Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? No

PASSENGER 1

Name Dennise Lim Gender Female

DETAILS OF POLICE ACTION

Was the accident reported to the police? Yes Police Station Name Choa Chu Kang Neighbourhood Police Centre Police Station Phone No (Phone) +65-18007659999 Alt. Police Station Phone No (Fax) +65-67644104 Police Station Address No 20 Choa Chu Kang Street 52 #01-02 Singapore 689286 Was notice of intended Prosecution given? No If yes, against whom?

CIRCUMSTANCES OF ACCIDENT

Making a right turn on a green light from Sinaran Drive into outest right lane of Irrawaddy Road. Accident took place at the pedestrain crosssing. Pedestrain was crossing from driver's left side.

ATTACHMENT(S)

Are accident photos available for attachment? Yes Was there any video captured by Car Camera? Yes Reasons for not uploading a video of the accident NO VIDEO UPLOADED Was there any audio recorded?

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	-
Were seat belts worn?	-
Was this injured conveyed to hospital by ambulance?	

UNDERTAKING

I,Della Lim Zi N	, (NRIC No), Hereby
at 1320 hrs hours per	Accident Statement lodged by me on 19 June 2021 taining to the accident involving motor car Reg. No:
knowledge, information and	belief.
I acknowledge that my insur a breach of policy terms and	ers are not liable under the contract of insurance if there is doubtions.
In the event that an unrelat	ed/unreported third party property or injury claim arises or
there is evidence emerges	that there is a breach of policy terms and conditions, I
irrevocably undertake to a	bsolve my insurer from all liability under the contract of
insurance and I undertake	to re-pay any sums paid by my insurers pursuant to the
contract of insurance upon i	eceipt of written demand by my insurers.
Signature	: Sellation
Name of Insured / Driver	: Della Lim Zi Mei
Nric No.	: S9506775A
Date	: 21 June 2021
Signature	: Joneston
Name of Policyholder	: Lim Kar Heng Dennis
Nric No.	: S1527083G
Date	: 21 June 2021



AIG Asia Pacific Insurance Pte. Ltd AIG Building 78 Shenton Way

MOTOR ACCIDENT INTERVIEW FORM

NAME	:	Della Lim Zi Mei
VEHICLE NUMBER	:	SLV4898S
DATE/ TIME OF ACCIDENT	: -	19 June 2021/ 1320hrs
PLACE OF ACCIDENT	:	Irrawaddy Road
THIRD PARTY VEHICLE (IF ANY)	: -	No

		OU DRIVE ON THE DAY OF THE ACCIDENT? IF YES, DID THE TRAFFIC YOU? IF YES, WHAT WAS THE RESULTS?
WHAT IS THE TYPE OF COLLISION AND		eness of the damages to all vehicles involved? and front bumper.
WERE YOU OR YOUR PASSENGER/S IN.	JURED? IF INJU	IRED, WHICH HOSPITAL? WERE YOU TAKEN TO THE TRAFFIC POLICE
FOR INVESTIGATION?		
No injury to my passenger	and I. Traff	fic police report is made.
Sulain		

NAME: Della Lim Zi Mei

I AFFIRMED THE ABOVE INFORMATION IS GIVEN TO MY BEST KNOWLEDGE

UNDERTAKING

I,Della Lim Zi I	Mei, (NRIC No. <u>S9506775A</u>), hereb
at 1320 hrs hours pe	Accident Statement lodged by me on19 June 2021 rtaining to the accident involving motor car Reg. No
	h I was the driver are true and accurate to the best of my
knowledge, information and	belief.
I acknowledge that my insu a breach of policy terms and	rers are not liable under the contract of insurance if there is d conditions.
In the event that an unrela	ted/unreported third party property or injury claim arises o
there is evidence emerges	s that there is a breach of policy terms and conditions,
irrevocably undertake to a	bsolve my insurer from all liability under the contract of
insurance and I undertake	to re-pay any sums paid by my insurers pursuant to the
contract of insurance upon	receipt of written demand by my insurers.
Olamatana	: Dellalin
Signature	: MMM
Name of Insured / Driver	: Della Lim Zi Mei
Nric No.	: S9506775A
Date	: 21 June 2021
	() () () () () () () () () ()
Signature	: , forezer
Name of Policyholder	: Lim Kar Heng Dennis
Nric No.	: S1527083G
Date	21 June 2021



AIG Asia Pacific Insurance Pte. Ltd AIG Building 78 Shenton Way #07-16

MOTOR ACCIDENT INTERVIEW FORM

NAME	: :	Della Lim Zi Mei
VEHICLE NUMBER	;	SLV4898S
DATE/ TIME OF ACCIDENT	:	19 June 2021/ 1320hrs
PLACE OF ACCIDENT	:	Irrawaddy Road
THIRD PARTY VEHICLE (IF ANY)	- :	No

DID YOU DRINK ANY ALCOHOLIC DRIN POLICE CONDUCT ANY BREATHE-ANALY NO	KS BEFORE Y YSER TEST ON	OU DRIVE ON THE DAY OF THE ACCIDENT? IF YES, DID THE TRAFFIC YOU? IF YES, WHAT WAS THE RESULTS?
WHAT IS THE TYPE OF COLLISION AND My own vehicle damage in t		veness of the damages to all vehicles involved? t and front bumper.
WERE YOU OR YOUR PASSENGER/S INJ	IURED? IF INJ	URED, WHICH HOSPITAL? WERE YOU TAKEN TO THE TRAFFIC POLICE
No injury to my passenger	and I. Tra	ffic police report is made.
Millalia		

NAME: Della Lim Zi Mei

I AFFIRMED THE ABOVE INFORMATION IS GIVEN TO MY BEST KNOWLEDGE



T/20210619/7020

1 of 4

Report No. T/20210619/7020

Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

REPORT OF	A	TRAFFIC	ACCIDENT
KEROKI OF	A	IKAFFIC	ACCIDENT

Date/Time 19/06/202		lade:	Vide Report No.: Station Diary E/20210619/0107		
Informant	t's Particu	ılars			
Name of I DELLA LI	nformant:	120/20	Address: 50 CHOA CHU KANG NORTH	H 7 #06-09 SINGAPORE 68952	
ID Type / ID No.: NRIC NO / S9506775A		75A	Contact No.: Home/Office:	Mobile: 96201919	
Nationality	y: DRE CITIZ	EN	Email: dellalim@live.com.sg		
Sex: Female	Sex: Age: Date of Birth:		Type of Informant: Driver	(a) (b) (b) (b) (c)	
Race: Chinese		Conser No.	Language: English	Institution / School Name:	
Occupation Human re	esource co g executiv	onsultant e search	Driving Licence Information: Class: 3A	Date of Expiry:	

Type of Accident:	Injury Pedestrian / Cyclist	Drink Drive: No	Date/Time of Accident: 19/06/2021 13:21	Type of Location T-Junction
Location:				
IRRAWADDY	ROAD			
		Road Surface:	Madical Leave	Road Speed Limit:
Weather: Clear Traffic Flow: One Way	10.0	Road Surface: Dry Traffic Control: Traffic Light - Wo	orking	Road Speed Limit: Traffic Volume: Light Anyone conveyed by

Details of V	A STATE OF THE PARTY OF THE PAR	Make	Model	Color	Conditio	No of
Vehicle No.	Type		The second secon	Black	Slightly	1
SLV4898S	Car	AUDI	A4	Diack	Damaged	eyed to sk

notails of Ve	ehicle Insurance			I D -
	Insurance Company	Insurance No	Effective	Expiry Date





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

2 of 4

Report No. T/20210619/7020

CONTINUATION OF REPORT

Details of Vehicle Insurance					
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date	
SLV4898S	AIG ASIA PACIFIC INSURANCE PTE. LTD.	7210027627	19/03/2021	18/03/2023	

Details of Perso								
Any Pedestrian I		- yal			A			
					edestrian Crossing: Used			
Driver								
Name	DELLA LIM ZI MEI		ID No.		S9506775A			
Related Vehicle	SLV4898S (Car)			Contact No.		96201919		
Hospital/Clinic	NIL		Class of Driving Licence & Expiry		Class: 3A Date of Expiry: NIL			
Date	NIL		Date		NIL			
No. of Davs gran	ted Medical Leave	NIL	Degree o	20.000000000000000000000000000000000000				
Passenger			_ 39.333	1000				
Name	DENISE LIM ZI XIA		g .	ID No.		S9620810C		
Related Vehicle	SLV4898S (Car)			Contact No.		96956399		
Hospital/Clinic	NIL		Class of Driving Licence & Expiry		Class: NIL Date of Expiry: NIL			
Date	NIL		Date	NIL				
No. of Davs grant			Degree of					
Pedestrian								
Name	HERPREEYA BADWAL		ID No.		NIL			
Related Vehicle	NIL			Contact No.		98559805		
Hospital/Clinic	MOUNT ELIZABETH NOVENA HOSPITAL		Class of Driving Licence & Expiry		Class: NIL Date of Expiry: NIL			
Date	19/06/2021		Date	EGUA	19/06	/2021		
	ed Medical Leave	NIL	Degree of		Slight			





4 of 4

Report No. T/20210619/7020

Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch

Signature Of Officer Recording The Report: Not applicable

Signature Of Interpreter: Not applicable

Officer In Charge Of Case: TP / TPHQ / SYED ZAYID MUHAMMAD BIN SYED ABDUL WAHID ALHINDUAN Contact No.: 65476404

Authentication Stamp NP168

Signature Of Informant:

The identity of the person making this report has been authenticated by Singpass. No signature is required.

Date/Time: 19/06/2021 17:03

Classification Of Case:



3 of 4

Report No. T/20210619/7020

Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

CONTINUATION OF REPORT

Brief Details.

Making a right turn on a green light from Sinaran Drive into outest right lane of Irrawaddy Road. Accident took place at the pedestrain crosssing. Pedestrain was crossing from driver's left side. There is an in car video footage.

PREMIUM AUTOMOBILES



55 UBI ROAD 1, SINGAPORE 408699 TEL: 6366 2323 FAX: 6841 1183

EMAIL: NORA.KHAI@PREMIUMAUTO.COM.SG / CLAIMS@PREMIUMAUTO.COM.SG

ESTIMATE

: ACCIDENT REPAIRS

WORKSHOP

: UBI ROAD 1

CONTACT NO

: 6366 2323

FAX NO

6841 1183

REFERENCE

PA/OD/0519/2021/TF

DATE

: 23-Jun-21

WIP

32214

VEHICLE NOT IN WORKSHOP. KINDLY ARRANGE FOR SURVEY ON 23/6/21

AIG ASIA PACIFIC INSURANCE PTE LTD

78 SHENTON WAY

#07-16 AIG BUILDING

SINGAPORE 079120

Attn: Motor Claims Dept

Tel: 6880 4602 - Fax: 6880 4838

OWNER'S NAME

: MR. LIM KAR HENG DENNIS

ADDRESS

: 50 CHOA CHU KANG NORTH 7

#06-09

SINGAPORE 689527

TELEPHONE

: HP +65 96254063

TYPE OF CLAIM

: OWN DAMAGE CLAIM

POLICY NO

7210027627

VEHICLE NO

SLV 4898 S

MODEL CODE

: A4 SEDAN 2.0 TFSI S TRONIC

MODEL YEAR

19/3/2021

ENGINE NO

DEM 025395

CHASSIS NO

: WAUZZZF45MN000903

MILEAGE

-

DATE IN

ESTIMATED BY

: JOHNNY BOO / ALLAN WU

ACCIDENT DATE

: 19-Jun-21

PLACE OF ACCIDENT

61 IRRAWADDY ROAD





55 UBI ROAD 1, SINGAPORE 408699 TEL: 6366 2323 FAX: 6841 1183

EMAIL: NORA.KHAI@PREMIUMAUTO.COM.SG / CLAIMS@PREMIUMAUTO.COM.SG

ESTIMATED LABOUR CHARGES FOR ACCIDENT VEHICLE SLV 4898 S

S/N	NATURE OF JOBS		CHARGES	SURVEYOR'S RECOMMENDATIONS
1	TO REMOVE, CHECK AND TRANSFER FRONT WIRE HARNESS FOR HEADLIGHTS, HORNS, OUTSIDE TEMPERATURE SENSOR AND HEADLIGHT WASHER ASSY AND FRONT PARKING AID	S/N	\$ 480.00	
2	TO REMOVE AND TRANSFER LHS HEADLIGHTS'S CONTROL UNIT AND POWER MODULE.	S/N	\$ 350.00	×
3	TO DISMANTLE AND RENEW FRONT BUMPER, BONNET, AND RHS HEADLIGHT. RE-ORGANIZE CRASH MANAGEMENT COMPONENTS. REINSTALL ALL PARTS REMOVED.		\$ 2,100.00	1000
4	TO RESPRAY FRONT BUMPER AND BONNET.		\$ 2,000.00	1100
5	TO CARRY OUT DIAGNOSTIC CHECK.	S/N	\$ 192.00	/
	TOTAL LABOUR CHARGES	:	\$ 5,122.00	



55 UBI ROAD 1, SINGAPORE 408699 TEL: 6366 2323 FAX: 6841 1183

EMAIL: NORA.KHAI@PREMIUMAUTO.COM.SG / CLAIMS@PREMIUMAUTO.COM.SG

MATERIAL LIST FOR ACCIDENT VEHICLE REGN NO. SLV 4898 S

DAMAGED PARTS & PRICES

5/N	PARTS DESCRIPTION	QTY	S/NETT	REMARKS
1	FRONT BUMPER Pers	1	\$ 2,233.00	·
2	FRONT BUMPER FIXING PARTS	1	\$ 358.00 +	
3	FRONT BUMPER SECURING STRIP	2	\$ 71.00 K	
4	FRONT BUMPER GRILLE - CENTER	1	\$ 196.00 🏃	
5	FRONT BUMPER CLOSING ELEMENT	1	\$ 262.00 K	
6	FRONT RADIATOR GRILLE CLOSING ELEMENT	1	\$ 262.00 t	
7	FRONT RADIATOR GRILLE 7	1	\$ 1,580.00 ₺	
8	FRONT BUMPER FORM	1	\$ 189.00 ₺	
9	FRONT BUMPER CARRIER	1	\$ 845.00 1	
10	FRONT BUMPER TOP COVER	1	\$ 127.00 ¥	
11	CAUTION STICKER	1	\$ 14.00 \$	
12	A/C STICKER	1	\$ 8.00 4	
13	FRONT LOCK CARRIER BRACKET	1	\$ 137.00 +	
4	FRONT BUMPER SUPPORT - LH / RH	2	\$ عد 58.00	Please alla
15	FRONT BONNET Dewled	1	\$ 3,246.00	Please alla resurvey of
16	FRONT BONNET ATTACHMENT PARTS ARE A	1	\$ 412.00 t	
17	FRONT BONNET IMPACT PROTECTION - CENTER / LH / RH	1/3	\$ 84.00	
18	FRONT HEADLIGHT - RH Ne pu	1	\$ 7,685.00 +	
19	FRONT RADIATOR AIR GUIDE - RH / RH / UPPER WC	3	\$ 76.00×	
20	FRONT NO. PLATE	S/N	\$ 60.00	
21	SUNDRIES ?		\$ 192.00	
	TOTAL SPARE PARTS	:	\$ 14,713.00	
	TOTAL LABOUR CHARGES	:	\$ 5,122.00	
	GRAND TOTAL	:	\$ 19,835.00	

ALL CHARGES ARE NOT INCLUSIVE OF GST

LEGEND:

REMARKS (OK) = APPROVED, REMARKS (X) = NOT APROVED SPARE PARTS ARE SPECIAL NETT.

PREMIUM AUTOMOBILES



55 UBI ROAD 1, SINGAPORE 408699 TEL: 6366 2323 FAX: 6841 1183

EMAIL: NORA.KHAI@PREMIUMAUTO.COM.SG / CLAIMS@PREMIUMAUTO.COM.SG

:

NAME

SURVEYED DATE

AUTHORISED DATE EXCESS COST

LIABILITY

REMARKS

: Adrian ()

: Rhol Authorised, 04 Days.

PLEASE NOTE

THIS ESTIMATE IS BASED ON VISUAL INSPECTION OF THE AFFECTED VEHICLE. SHOULD WE REQUIRE FURTHER LABOUR CHARGES AND SPARE PARTS IN THE PROGRESS OF REPAIR, WE SHALL INFORM YOU ACCORDINGLY. FOR INSPECTION OF VEHICLE, PLEASE REFER TO MS. NORAH KHAI AT TEL: 6768 9828 / 6768 9911 FOR

APPOINTMENT.

YOURS FAITHFULLY,
PREMIUM AUTOMOBILES PTE LTD

JOHNNY BOO BODY REPAIR MANAGER ALLAN WU CLAIMS CONSULTANT

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars					
Owner ID Type:	Singapore NRIC				
Owner ID:	083G				
Vehicle Details					
Vehicle No.:	SLV4898S				
Vehicle to be Exported:	No				
Intended Deregistration Date:	23 Jun 2021				
Vehicle Make:	AUDI				
Vehicle Model:	A4 2.0 TFSI S TRONIC				
Primary Culour:	Black				
Manufacturing Year:	2020				
Engine No.:	DEM025395				
Chassis No.:	WAUZZZF45MN000903				
Maximum Power Output:	110.0 kW (147 bhp)				
Open Market Value:	\$32,262.00				
Original Registration Date:	19 Mar 2021				
First Registration Date:	19 Mar 2021				
Transfer Count:	0				
Actual ARF Paid: Intended PARF Rebate Details	\$37,167.00				
PARF Eligibility:	Yes				
PARF Eligibility Expiry Date:	18 Mar 2031				
PARF Rebate Amount: Intended COE Rebate Details	\$27.875.00				
COE Expiry Date:	18 Mar 2031				
COE Category:	B - Car above 1600cc or 97kW (130bhp)				
COE Period(Years):	10				
QP Paid:	\$47,001.00				
COE Rebate Amount:	\$45,731.00				
Total Rebate Amount:	\$73,606.00				

The information contained herein is correct as at 23 Jun 2021

ОК

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Toyota Alphard

\$208888 G'teed COE w/o top up. Viewing & Test Drive available at our showroom. Loan Interest @ 1.68%, No Admin Fee, Flexible Loan

Min Price V to No Max

Depreciation 🗸

Vehicle Type 💙

New Audi A4 Cars for Sale (2 vehicles)

Sort by Most Popular

Car Model

Premium Automobiles

Built in

✓ results/page

Audi A4 SeJan Mild Hybrid



\$207,880

Germany



2.0 TFSI S tronic (A)

\$18,900 /yr ?

* 16.4km/l | 148bhp | 7-speed (A) S tronic

* 15.6km/l | 148bhp | 7-speed (A) S tronic

1 User Review

Audi A4 Avant Mild Hybrid



2.0 1 FSI S tronic (A)

\$217,880

\$19,700 /yr ?

Premium Automobiles

Germany

Rate it!

Car Model

results/page

There are 9 Past New Audi A4 Cars for Sale no longer being sold by local distributors 'iew all past New Audi A4 Cars for Sale cars



Audi A4 Sedan (2016-2020)



Audi A4 Avant (2016-2019)



(2013-2016)



(2008-2016)



Audi A4 Allroad (2011-2014)

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